Company Tracking Number: WC AR08046CGF01

TOI: 16.0 Workers Compensation Sub-TOI: 16.0000 WC Sub-TOI Combinations

Product Name: B-1407 Terrorism - Catastrophe Provisions

Project Name/Number: 2008 NCCI REFERENCE FILINGS/WC AR08046CGF01

# Filing at a Glance

Companies: Bituminous Casualty Corporation, Bituminous Fire and Marine Insurance Company Product Name: B-1407 Terrorism - Catastrophe SERFF Tr Num: LDRX-125784667 State: Arkansas

**Provisions** 

TOI: 16.0 Workers Compensation SERFF Status: Closed State Tr Num: #? \$50 Sub-TOI: 16.0000 WC Sub-TOI Combinations Co Tr Num: WC AR08046CGF01 State Status: Fees verified

Filing Type: Form Co Status: Reviewer(s): Betty Montesi, Carol

Stiffler

Author: SPI Bituminous Disposition Date: 08/22/2008

Date Submitted: 08/20/2008 Disposition Status: Approved

Effective Date Requested (New): 01/01/2009 Effective Date (New): 01/01/2009

Effective Date Requested (Renewal): 01/01/2009 Effective Date (Renewal):

State Filing Description:

#### **General Information**

Project Name: 2008 NCCI REFERENCE FILINGS

Status of Filing in Domicile:

Project Number: WC AR08046CGF01

Domicile Status Comments:

Reference Organization: Reference Number: Advisory Org. Circular:

Filing Status Changed: 08/22/2008

State Status Changed: 08/21/2008 Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

NCCI has submitted Item P-1406 - Revisions to Endorsements WC 00 01 13 A, WC 00 04 21 B, and WC 00 04 22 to the state regulators. Item P-1406 proposes to withdraw the Terrorism Risk Insurance Program Resuthorization Act Endorsement (WC 00 01 13 A), and to update the Domestic Terrorism, Earthquakes, and Catastrophic Industrial Accidents Premium Endorsement (WC 00 04 21 B), and the Foreign Terrorism Premium Endorsement (WC 00 04 22) to reflect certain changes required to address losses from "terrorism" and "catastrophes (other than certified acts of terrorism)."

Company Tracking Number: WC AR08046CGF01

TOI: 16.0 Workers Compensation Sub-TOI: 16.0000 WC Sub-TOI Combinations

Product Name: B-1407 Terrorism - Catastrophe Provisions

Project Name/Number: 2008 NCCI REFERENCE FILINGS/WC AR08046CGF01

Catastrophe (Other Than Certified Acts of Terrorism Premium Endosement WC 00 04 21 C

Terrorism Risk Insurance Program Reauthorization Act Disclosure Endorsement WC 00 04 22 A

Bituminous Casualty Corporation and Bituminous Fire and Marine Insurance Company are filing to delay the effective date for the adoption of the above NCCI revision from 9-1-08 until 1-1-09. We use a third party rating vendor who is unable to have our system updated by the NCCI indicated date. We are making no changes to this revision other than the effective date.

Should you have any questions or need any additional information, please to not hesitate to contact me.

Sincerely,

Rosanne Sly-Ginther

# **Company and Contact**

#### **Filing Contact Information**

Rosanne Sly-Ginther, Advanced Administrative rslyginther@bituminousinsurance.com

Analyst

320 18th Street (309) 732-0204 [Phone] Rock Island, IL 61201 (309) 786-3847[FAX]

**Filing Company Information** 

Bituminous Casualty Corporation CoCode: 20095 State of Domicile: Illinois 320 18th Street Group Code: 150 Company Type: Commercial

Property and Casualty

Rock Island, IL 61201 Group Name: Bituminous Insurance State ID Number:

Companies

(309) 786-5401 ext. [Phone] FEIN Number: 36-0810360

-----

Bituminous Fire and Marine Insurance CoCode: 20109 State of Domicile: Illinois

Company

320 18th St. Group Code: 150 Company Type: Commercial

**Property and Casualty** 

Rock Island, IL 61201 Group Name: Bituminous Insurance State ID Number:

SERFF Tracking Number: LDRX-125784667 State: Arkansas

First Filing Company: Bituminous Casualty Corporation, ... State Tracking Number: #? \$50

Company Tracking Number: WC AR08046CGF01

TOI: 16.0 Workers Compensation Sub-TOI: 16.0000 WC Sub-TOI Combinations

Product Name: B-1407 Terrorism - Catastrophe Provisions

Project Name/Number: 2008 NCCI REFERENCE FILINGS/WC AR08046CGF01

Companies

(309) 786-5401 ext. [Phone] FEIN Number: 36-6054328

-----

Company Tracking Number: WC AR08046CGF01

TOI: 16.0 Workers Compensation Sub-TOI: 16.0000 WC Sub-TOI Combinations

Product Name: B-1407 Terrorism - Catastrophe Provisions

Project Name/Number: 2008 NCCI REFERENCE FILINGS/WC AR08046CGF01

# **Filing Fees**

Fee Required? No Retaliatory? No

Fee Explanation:

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Bituminous Casualty Corporation \$0.00 08/20/2008
Bituminous Fire and Marine Insurance \$0.00 08/20/2008

Company

Company Tracking Number: WC AR08046CGF01

TOI: 16.0 Workers Compensation Sub-TOI: 16.0000 WC Sub-TOI Combinations

Product Name: B-1407 Terrorism - Catastrophe Provisions

Project Name/Number: 2008 NCCI REFERENCE FILINGS/WC AR08046CGF01

# **Correspondence Summary**

### **Dispositions**

Status	Created By		Created	On	Date Submitted		
Approved Filing Notes	Carol Stiffler			08/22/2008		08/22/2008	
Subject		Note Type		Created By	Created On	Date Submitted	
Filing fee		Note To Reviewe	er	SPI Bituminous	08/22/2008	3 08/22/2008	
Filing fee		Note To Filer		Carol Stiffler	08/21/2008	3 08/21/2008	
Filing fee		Note To Reviewer		SPI Bituminous	08/20/2008 08/20/2008		

Company Tracking Number: WC AR08046CGF01

TOI: 16.0 Workers Compensation Sub-TOI: 16.0000 WC Sub-TOI Combinations

Product Name: B-1407 Terrorism - Catastrophe Provisions

Project Name/Number: 2008 NCCI REFERENCE FILINGS/WC AR08046CGF01

# **Disposition**

Disposition Date: 08/22/2008

Effective Date (New): 01/01/2009

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

**Overall Rate Information for Multiple Company Filings** 

Overall Percentage Rate Indicated For This Filing 0.000%

Overall Percentage Rate Impact For This Filing 0.000%

Effect of Rate Filing-Written Premium Change For This Program \$0

Effect of Rate Filing - Number of Policyholders Affected 0

Company Tracking Number: WC AR08046CGF01

TOI: 16.0 Workers Compensation Sub-TOI: 16.0000 WC Sub-TOI Combinations

Product Name: B-1407 Terrorism - Catastrophe Provisions

Project Name/Number: 2008 NCCI REFERENCE FILINGS/WC AR08046CGF01

Item Type Item Name Item Status Public Access

Supporting Document Uniform Transmittal Document-Property & Approved Yes

Casualty

Company Tracking Number: WC AR08046CGF01

TOI: 16.0 Workers Compensation Sub-TOI: 16.0000 WC Sub-TOI Combinations

Product Name: B-1407 Terrorism - Catastrophe Provisions

Project Name/Number: 2008 NCCI REFERENCE FILINGS/WC AR08046CGF01

#### **Note To Reviewer**

#### Created By:

SPI Bituminous on 08/22/2008 11:19 AM

### Subject:

Filing fee

#### Comments:

I have requested a check to send but I will not receive it until Monday. I will mail it to you 8/25/08. Thank you very much for your help.

#### Rosanne

Company Tracking Number: WC AR08046CGF01

TOI: 16.0 Workers Compensation Sub-TOI: 16.0000 WC Sub-TOI Combinations

Product Name: B-1407 Terrorism - Catastrophe Provisions

Project Name/Number: 2008 NCCI REFERENCE FILINGS/WC AR08046CGF01

**Note To Filer** 

#### Created By:

Carol Stiffler on 08/21/2008 09:26 AM

#### Subject:

Filing fee

#### **Comments:**

I think there is a way to send an EFT once it is submitted but I don't know how you do it. You might want to contact the SERFF Help Desk at serffhelp@naic.org.

I can approve the filing contingent on receiving the filing fee if you will confirm that you will send it--either by EFT or check.

Company Tracking Number: WC AR08046CGF01

TOI: 16.0 Workers Compensation Sub-TOI: 16.0000 WC Sub-TOI Combinations

Product Name: B-1407 Terrorism - Catastrophe Provisions

Project Name/Number: 2008 NCCI REFERENCE FILINGS/WC AR08046CGF01

#### **Note To Reviewer**

#### Created By:

SPI Bituminous on 08/20/2008 03:44 PM

#### Subject:

Filing fee

#### **Comments:**

I overlooked including the filing fee with EFT. Unless you can unlock the filing on your end I will request a check and send it through the mail. I apologize for the confusion and will wait to hear from you on how it should be submitted.

#### Rosanne

Company Tracking Number: WC AR08046CGF01

TOI: 16.0 Workers Compensation Sub-TOI: 16.0000 WC Sub-TOI Combinations

Product Name: B-1407 Terrorism - Catastrophe Provisions

Project Name/Number: 2008 NCCI REFERENCE FILINGS/WC AR08046CGF01

# **Rate Information**

Rate data does NOT apply to filing.

Company Tracking Number: WC AR08046CGF01

TOI: 16.0 Workers Compensation Sub-TOI: 16.0000 WC Sub-TOI Combinations

Product Name: B-1407 Terrorism - Catastrophe Provisions

Project Name/Number: 2008 NCCI REFERENCE FILINGS/WC AR08046CGF01

# **Supporting Document Schedules**

**Review Status:** 

Satisfied -Name: Uniform Transmittal Document- Approved 08/22/2008

Property & Casualty

**Comments:** 

Attachment:

AR - NAIC P&C TRANSMITTAL DOCUMENT.PDF

# **Property & Casualty Transmittal Document**

			ance Department Use only						
		he filing is received:							
b. Analysi									
c. Dispos									
			f disposition of the filing: /e date of filing:						
		e. Ellecti	New Bu						
				l Business					
		f Ctata		Business					
į		f. State f		<b>.</b>					
		h. Subject							
		n. Subjec	or Codes						
3.	Group Name							Group NAIC #	
	Bituminous Insurance Compa	anies						150	
4.	Company Name(s)			Domicile	NAIC #	FEIN #	#	State #	
	Bituminous Casualty Corpora	ation		IL	20095	36-08			
	Bituminous Fire and Marine I		,	IL	20109	36-605			
	Ditarrinodo i no dria Marino I	modranoc Company	'	, ' <u>-</u>	20100	00 000	7-1020		
		-							
5.	Company Tracking Numbe	wc A	AR08046	CGF01					
Conta	ct Info of Filer(s) or Corpora	te Officer(s) [inclu	de toll-fre	ee number]					
6.	Name and address	Title		phone #s	FAX	#		e-mail	
		Advanced							
	Danas and Olas Chathan	Administrative	000	475 4477	000 700	00.47		ther@bituminousin	
	Rosanne Sly-Ginther	Analyst		00-475-4477 309-786 Ext. 204		surance.com			
	320 18th Street		=>	(l. 204					
	Rock Island IL 61201								
				e Sly- G	+				
			Knarr	e Sly-Sl	when				
7.	Signature of authorized file	er	, (0,000	0					
8.	Please print name of author	orized filer	Rosanne Sly-Ginther						
Filina	Information (see General Ins	tructions for descrip	tions of	these fields)					
9.	Type of Insurance (TOI)			orkers Com	pensation				
10. Sub-Type of Insurance (Sub-TOI)			16.0000 WC Sub-TOI Combinations						
11.	State Specific Product cod								
	applicable) [See State Specific								
12.	Company Program Title (M	arketing Title)		rs Compens					
13.	Filing Type		_	te/Loss Cost		lules		Rates/Rules	
			For					es/Rules/Forms	
			□ vvit	hdrawal		mer (gl	ve descr	ιριιση)	
14.	Effective Date(s) Requeste	d	New:	01/01/09		Ren	ewal·   (	01/01/09	
15. Reference Filing?			New:         01/01/09         Renewal:         01/01/09           ☑ Yes         ☐ No						
16. Reference Organization (if applicable)			NCCI						
17.	Reference Organization # 8		P-1406	 6					
18. Company's Date of Filing				08/20/08					
19.	Status of filing in domicile			t Filed	Pending	☐ Aut	horized	Disapproved	
			_						

PC TD-1 pg 1 of 2 © 2007 National Association of Insurance Commissioners

### **Property & Casualty Transmittal Document**

20. This filing transmittal is part of Company Tracking # WC AR08046CGF01

21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

NCCI has submitted Item P-1406 - Revisions to Endorsements WC 00 01 13 A, WC 00 04 21 B, and WC 00 04 22 to the state regulators. Item P-1406 proposes to withdraw the Terrorism Risk Insurance Program Resuthorization Act Endorsement (WC 00 01 13 A), and to update the Domestic Terrorism, Earthquakes, and Catastrophic Industrial Accidents Premium Endorsement (WC 00 04 21 B), and the Foreign Terrorism Premium Endorsement (WC 00 04 22) to reflect certain changes required to address losses from "terrorism" and "catastrophes (other than certified acts of terrorism)."

Catastrophe (Other Than Certified Acts of Terrorism Premium Endosement WC 00 04 21 C Terrorism Risk Insurance Program Reauthorization Act Disclosure Endorsement WC 00 04 22 A

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Sincerely, Rosanne Sly-Ginther

22.	Filing Fees (Filer must provide check # and fee amount if applicable.)
	[If a state requires you to show how you calculated your filing fees, place that calculation below]

Check #: fee sent EFT Amount:

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

PC TD-1 pg 2 of 2

<sup>\*\*\*</sup>Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)